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PATENT APPLICATION FOR DEPARTMENT APPLICATION FO								Application or Docket Number							
PATENT APPLICATION FEE DETERMINATION RECO Effective November 10, 1998								ORI	<b>'</b>	9/247886					
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY OTH			ER THAN L ENTITY			
F	FOR NUMBER FILED NUMBER EXTRA						7	RATE		FEE	7	RATE			
BASIC FEE							1		+	80.00	٦.		760.00		
T	OTAL CLAIMS			50 min	us 20=	• 30:			X\$ 9=	+		OF OF	140.40		
IN	DEPENDENT	CLAIMS		9 min	us 3 =	• (:		1	X39=	+		10	`		
М	MULTIPLE DEPENDENT CLAIM PRESENT						1	<b>₩</b>	4		OF	X78=	468		
•									+130=			OF	+260=		
	If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL			OF	TOTAL	1768	
	CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)									. ENT	ПТҮ	OR		R THAN ENTITY	
A HENOMENI A		REM/	AIMS AINING TER DMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	TIC	DDI- DNAL EE		RATE	ADDI- TIONAL FEE	
	Total - Independent	1.0	8	Minus	**.	50	=10		X\$ 9=	T		OR	X\$18=		
		ENITATION	N OF M	Minus	***	9	= pa	Γ	X39=			OR	X78=		
!	FIRST PRES	LIVIATIO	V OF M	OLTIPLE D	EPEND	ENT CLAIM		上		十		Un			
								L	+130=	_		OR	+260=		
		(Colui	<b> 1\</b>					AI	DDIT. FEE			OR	TOTAL ADDIT. FEE		
7	1.	CLA	IMS	T		olumn 2) IIGHEST	(Column 3)	_							
		REMA AFT AMEND	ER		PR	IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE		DI- NAL		RATE	ADDI- TIONAL FEE	
	Total Independent	1:21		Minus	1	58	-0		X\$ 9=			OR	X\$18=		
_	FIRST PRESE			Minus JLTIPLE DE	PENDE	NT CLAIM	ne		X39=			OR	X78=		
							7.0	L	130=			DR	+260=		
	*,	•						ADI	TOTAL DIT. FEE			OR .	TOTAL		
Т		(Colum			(Co	lumn 2) -	(Column 3)						DDIT. FEE		
		REMAII AFTE AMENDI	NING R		PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA	F	RATE	ADI TION	IAL	ſ	RATE	ADDI- TIONAL	
┢	Total	.3	1	Minus	**	58 ·	<i>- 0</i>	<b> </b>	\$ 9=	FE		_}	X\$18=	FEE	
L	ndependent	• 4		Minus	••••	4	= &	-			$\dashv$	R			
Ľ	IRST PRESE	NIATION	OF MU	LTIPLE DE	PENDE	NT CLAIM	00	H	(39=		_ °	R	X78=		
lf t H •	the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								130=		o	R	+260=		
711	he "Highest Nun	nher Preside	usiy Pak	FOR IN IHI	SSPAC	E is less than	20, enter *20.*	ADD	TOTAL IT. FEE		<u> </u>	R. A	TOTAL DDIT. FEE		
- • •	9	POLECIEVIOU	isiy Paid	ror (Total o	r Indepe	ndent) is the i	3, enter "3," highest number fo	ound i	n the appr	opriat	e box in	colur	 Trn 1.		

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PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 29, 1999															
	CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
FOR NUM				ER FILED		NUMBER	EXTRA		RATE	FEE	7	RATE	FEE		
ВА	SIC FEE									345.00	OR		690.00		
TC	TAL CLAIMS			minus	20=	*		] [	X\$ 9=		OR	X\$18=			
INC	EPENDENT C	LAIMS	minus 3 =			*			X39=		OR	X78=	<b></b>		
MU	MULTIPLE DEPENDENT CLAIM PRESENT											.000	<u> </u>		
* If	* If the difference in column 1 is less than zero, enter "0" in column 2									ļ	OR	+260=			
	С	SASA	MENDED	•	TOTAL		OR	TOTAL	TUAN						
	here's	(Colu	ımn 1)		(C	olumn 2)	(Column 3)	. s	OTHER THAN SMALL ENTITY OR SMALL ENTITY						
AMENDMENT #		REM/	AIMS AINING TER DMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NDN	Total	. 4	0	Minus	**	58	=	] ] ;	X\$ 9=		OR	X\$18=			
AME	Independent			Minus	***	9	=		X39=		OR	X78=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+260=			
									TOTAL DIT. FEE			TOTAL ADDIT, FEE			
		(Colu	ımn 1)	•	(C	olumn 2)	(Column 3)	AUI	DII. FEE		. ,	אטטוו. רבבן			
NDMENT B		REMA AF	AIMS AINING TER DMENT		PA	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*		Minus	**		=	>	<b>(</b> \$ 9=		OR	X\$18=			
AME	Independent	+		Minus	***		=	>	X39=		OR	X78=			
	FIRST PRESE	INTATIO	N OF MC	DETIPLE DEF	END	ENT CLAIM		+	130=		OR	+260=			
											OB	TOTAL			
		(Colu	mn 1)		(C	olumn 2)	(Column 3)	ADI	DIT. FEE		,	ADDIT. FEE			
AMENDMENT C		REMA	AIMS AINING TER DMEN!T		l PR	HIGHEST NUMBER EVIOUSLY PAID FOR	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NDN	Total	*		Minus	**		=	×	(\$ 9=		OR	X\$18=			
AME	independent	*		Minus	***		=	<b>\</b>	(39=		OR	X78=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-	100			· · · · · · · · · · · · · · · · · · ·			
۱ ۰ ۱	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								130= TOTAL		OR	+260=			
***	If the "Highest Nu	mber Pre	viously Pa	aid For" IN THI	S SPA	CE is less tha	n 3, enter "3."	AUL	IT. FEE			TOTAL ADDIT. FEE			
· '	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

# It does NOT get mailed to the applicant.

### NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 9/247 886

#### Total Fee Calculation

	Fee Code	Total . # Claims	Number Extra	x	Fee	Fee	=	T-4-1
	Sm/Lg.	# Claims	DATI	<u></u>	Sm. Entity	Lg. Entity		Total
Basic Filing Fee	201/101					760	=	
Total Claims >20	203/103	<u>50</u> -20	= 30	x		540	<i>*</i>	
Independent Claims >3	202/102	9 -3=	= _6_	x		468	=	
Mult. Dep Claim Present	204/104						=	
Surcharge	205/105	• •				130	=	ा <u>। । । । । । । । । । । । । । । । । । ।</u>
English Translation	_139	•	•		·		•	<u>-</u>
TOTAL FEE CALCUL	MOITA					<u>ن</u>		1898
Fees due upon filing	the application	k.			·		٠,٠	-
Total Filing Fees Due	e= \$_	18	98	_				
Less Filing Fees Sub	mitted -\$_	Ø		——	· · !			
BALANCE DUE	= \$ _	189	8	·		ı		
f./	He							
Office of Initial Pater	nt Examinatio	0				•		

FORM OIPE-RAM-01 (Rev. 12/97)